



11-06-03

1626

AMENDMENT TRANSMITTAL LETTER

Docket No.
PAZ-080CP

Application No.
09/895812-Conf. #1583

Filing Date
June 29, 2001

Examiner
R. Gerstl

Art Unit
1626

Applicant(s): Mark L. Nelson, et al.

Invention: 7-SUBSTITUTED TETRACYCLINE COMPOUNDS

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

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CLAIMS AS AMENDED

	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	195	- 100 =	95	x 18.00	1,710.00
Independent Claims	10	- 4 =	6	x 86.00	516.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within third month					950.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					3,176.00

☒ Large Entity

☐ Small Entity

☐ No additional fee is required for this amendment.

☒ Please charge Deposit Account No. 12-0080 in the amount of \$ 3,176.00

A duplicate copy of this sheet is enclosed.

☐ A check in the amount of \$ _____ to cover the filing fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge and credit Deposit Account No. 12-0080 as described below. A duplicate copy of this sheet is enclosed.

☒ Credit any overpayment.

☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

Cynthia M. Soroos
Cynthia M. Soroos
Attorney Reg. No.: 53,623

Dated: November 5, 2003

LAHIVE & COCKFIELD, LLP
28 State Street
Boston, Massachusetts 02109
(617) 227-7400

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 354 229 801 US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: November 5, 2003

Signature: *Cynthia M. Soroos* (Cynthia M. Soroos)

OIP E JC7
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PTO/SB/17 (10-02)
Approved for use through 10/31/2002. OMB 0651-0032
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2003</h3> <p style="margin: 0; font-size: small;">Patent fees are subject to annual revision.</p>		<p style="margin: 0; font-weight: bold;">Complete if Known</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width: 50%;">Application Number</td><td>09/895812-Conf. #1583</td></tr> <tr><td>Filing Date</td><td>June 29, 2001</td></tr> <tr><td>First Named Inventor</td><td>Mark L. Nelson</td></tr> <tr><td>Examiner Name</td><td>R. Gerstl</td></tr> <tr><td>Group Art Unit</td><td>1626</td></tr> <tr><td>Attorney Docket No.</td><td>PAZ-080CP</td></tr> </table>		Application Number	09/895812-Conf. #1583	Filing Date	June 29, 2001	First Named Inventor	Mark L. Nelson	Examiner Name	R. Gerstl	Group Art Unit	1626	Attorney Docket No.	PAZ-080CP
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<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27															
TOTAL AMOUNT OF PAYMENT (\$) 3,176.00															

<p style="margin: 0; font-weight: bold;">METHOD OF PAYMENT (check all that apply)</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None </div> <div> <input checked="" type="checkbox"/> Deposit Account </div> </div> <div style="margin-top: 10px;"> Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP </div> <p style="margin: 5px 0; font-size: small;">The Commissioner is hereby authorized to: (check all that apply)</p> <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments </div> <div> <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application </div> </div> <div> <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. </div>				<p style="margin: 0; font-weight: bold;">FEE CALCULATION (continued)</p> <h3 style="margin: 0;">3. 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Name (Print/Type)	Cynthia M. Soroos	Registration No. (Attorney/Agent)	53,623
Signature		Telephone	(617) 227-7400
		Date	November 5, 2003

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 354 229 801 US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: November 5, 2003	Signature: (Cynthia M. Soroos)